lication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

		Life		DC1 1, 20						<u> </u>	025	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY			THAN
Т	OTAL CLAIMS	S	Colum	III 1)	(Column 2)		ì	TYPE	<u> </u>	OF.		ENTITY
								RATE		4	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	EE	OR	BASIC FEE	95D
TOTAL CHARGEABLE CLAIMS			ოinus 20=		*			XS 9=		OR	XS18=	
INDEPENDENT CLAIMS) minus 3 =					X43=		OR	X86=	,
M	JLTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								COGALA	ENITITY.	-	OTHER	
_	Т	(Column 1)	1	(Colun		(Column 3)	} ;	SMALL	ENTITY	OR Ti	SMALL	· ·
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ZOZ	Total		Minus	triù .		=		XS 9=		OR	XS18=	
AME	Independent		Minus	***		=	X43=			OR	X86=	
_	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
		•					Ł	TOTAL			TOTAL	
		(Column 1)		(Colum	·= 0\	(Column 3)	•	ADDIT. FEE	:		ADDIT. FEE	
_		(Column 1)		HIGHE		(COMMITS)	r		ADDI	7 (ADDI-
ENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL
AMENDMENTB	Total	· s	Minus	on ·		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	000]=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=	•
						•		TOTAL			TOTAL ADDIT. FEE	<u> </u>
		(Column 1)		(Colum	n 2) [.]	(Column 3)	. A	DDIT. FEE		a.	AUDII. FEE	
AMENDMENTC	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	o	Minus	tra .		=		X\$ 9=		OR	X\$18=	
	Independent	٠	Minus	000		= .	-	X43=		. }	X86=	
`	FIRST PRESE			· ·	OR							
0 14	the entry in setu	mn 1 is loss than th	o onto de la la	0	o• :- ·	.mn 2		+145=		OR	+290=	•
∞ If	of the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL DDIT. FEE	. <u> </u>	OR	TOTAL DDIT. FEE	
. T	he "Highest Num	ther Previously Paid	For (Total or	Independen	ress mar It) is the	। ਹ, ਦਜਦਾ ਹੈ. highest number	foun	d in the ap	propriate bo	in colu	ımn 1.	

FORM PTO-875 (Rev 10:03)

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